
CMS Manual System

Pub. 100-04 Medicare Claims Processing

**Department of Health &
Human Services (DHHS)
Centers for Medicare &
Medicaid Services (CMS)**

Transmittal 596

Date: JUNE 24, 2005

CHANGE REQUEST 3452

This transmittal rescinds and replaces Transmittal 336, dated October 29, 2004. We are correcting the section number for Indian Health Service/Tribal Hospital Inpatient Social Admits from section 240.1 to section 240.2. All other information remains the same.

SUBJECT: Indian Health Service (IHS) or Tribal Hospitals Including Critical Access Hospital (CAH) Payment Methodology for Inpatient Social Admissions and Outpatient Services Occurring During Concurrent Stays

I. SUMMARY OF CHANGES: Indian Health Service (IHS) or Tribal Hospitals including (CAHs) often bill a Type of Bill (TOB) 12X for social admissions which will be denied by the designated FI when a subsequent TOB 13X or 72X is billed by a separate facility for outpatient services or dialysis services rendered during a social admission at the IHS/Tribal Hospital. Social admission stays do not qualify for any payment on either an 11X or 12X TOB.

NEW/REVISED MATERIAL - EFFECTIVE DATE: April 1, 2005

***IMPLEMENTATION DATE: April 4, 2005**

Disclaimer for manual changes only: The revision date and transmittal number apply to the red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS:

(R = REVISED, N = NEW, D = DELETED)

R/N/D	CHAPTER/SECTION/SUBSECTION/TITLE
R	4/Table of Contents
N	4/240.2/Indian Health Service/Tribal Hospital Inpatient Social Admits

***III. FUNDING:**

These instructions shall be implemented within your current operating budget.

IV. ATTACHMENTS:

X	Business Requirements
X	Manual Instruction
	Confidential Requirements
	One-Time Notification
	Recurring Update Notification

***Medicare contractors only**

Attachment - Business Requirements

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SUBJECT: Indian Health Service (IHS) or Tribal Hospitals Including Critical Access Hospital (CAH) Payment Methodology for Inpatient Social Admissions and Outpatient Services Occurring During Concurrent Stays

I. GENERAL INFORMATION

A. Background: There may be situations when an American Indian/Alaska Native (AI/AN) beneficiary is admitted to an IHS/Tribal facility for social reasons. These social admissions are for patient and family convenience and are not billable to Medicare on either an 11X or 12X Type of Bill (TOB). For admissions before surgery, only the scheduled surgery and related services may be billed on an 83X TOB, if the surgery is performed on an outpatient basis, and on an 11X TOB, if the surgery is performed on an inpatient basis. Placing a patient in a room for social reasons after an inpatient discharge may not be billed to Medicare. For patients in a social admission status requiring outpatient services at another facility, the 12X TOB, if submitted, will cause an edit to reject the outpatient services. Since there is a significant number of social admissions in IHS/Tribal facilities, Medicare has decided to disallow payment for inpatient Part B ancillary services during a social admission stay when there is another bill from a different facility for an outpatient service. A 12X TOB from the admitting facility with a 13X TOB from another hospital or a 72X TOB from a Renal Dialysis Facility (RDF) would create a duplicate payment and this is inappropriate.

B. Policy:

1. When a 13X TOB is received from another hospital or a 72X TOB from a Renal Dialysis Facility covering the same time period as a 12X TOB from an IHS/Tribal facility including IHS/Tribal Critical Access Hospitals, the 12X TOB is presumed to represent a social admission and is disallowed. The 13X TOB/ 72X TOB will be paid.
2. The social admission stay does not qualify for any payment for the TOBs 11X or 12X.
3. The social admission cannot be used to satisfy the 3-day prior stay for Skilled Nursing Facilities (SNF).

C. Provider Education: A Medlearn Matters provider education article related to this instruction will be available at www.cms.hhs.gov/medlearn/matters shortly after the CR is released. You will receive notification of the article release via the established "medlearn matters" listserv. Contractors shall post this article, or a direct link to this article, on their Web site and include information about it in a listserv

message within 1 week of the availability of the provider education article. In addition, the provider education article must be included in your next regularly scheduled bulletin. Contractors are free to supplement Medlearn Matters articles with localized information that would benefit their provider community in billing and administering the Medicare program correctly.

II. BUSINESS REQUIREMENTS

"Shall" denotes a mandatory requirement

"Should" denotes an optional requirement

[illegible]

Requirement Number	Requirements	Responsibility (place an “X” in the columns that apply)								
		FI	RHHI	Carrier	DMERC	Shared System Maintainers				Other
						FISS	MCS	VMS	CWF	
3452.3.1	The FI shall reject a TOB 12X from an IHS/ Tribal Hospital is submitted with a LIDOS that is equivalent or immediately following the discharge date from the same hospital. Effective April 1, 2005.	X								
3452.4	The FI shall only pay the outpatient services on the 13X TOB from the facility other than the IHS/Tribal inpatient facility for periods of inpatient stays considered to be social admissions. Effective April 1, 2005.	X								
3452.4.1	The FI shall only pay the appropriate dialysis services on the 72X TOB from the facility other than the IHS/Tribal inpatient facility for periods of inpatient stays considered to be social admissions. Effective April 1, 2005.	X								
3452.5	The FI shall not pay ancillary services on the 12X TOB from the IHS/Tribal facility when there is an outpatient bill TOB 13X from another hospital for the same or overlapping time period. Effective April 1, 2005.	X								
3452.5.1	The FI shall not pay ancillary services on the 12X TOB from the IHS/Tribal facility when there is an outpatient bill, 72X TOB, from an RDF for the same or overlapping time period. Effective April 1, 2005.	X								
3452.6	Both CWF and the FI shall identify IHS hospitals by provider number.	X						X		

III. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS

A. Other Instructions: N/A

X-Ref Requirement #	Instructions

B. Design Considerations: N/A

X-Ref Requirement #	Recommendation for Medicare System Requirements

C. Interfaces: N/A

D. Contractor Financial Reporting /Workload Impact: N/A

E. Dependencies: N/A

F. Testing Consideration: N/A

IV. SCHEDULE, CONTACTS, AND FUNDING

Effective Date*: April 1, 2005 Implementation Date: April 4, 2005 Pre-Implementation Contact(s): Pat Barrett at 410-786-0508 Post-Implementation Contact(s): Regional Offices	Medicare Contractors shall implement these instructions within their current operating budgets.
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***Unless otherwise specified, the effective date is the date of service.**

Medicare Claims Processing Manual

Chapter 4 - Part B Hospital (Including Inpatient Hospital Part B and OPPS)

Table of Contents

(Rev.596, 06-24-05)

240.2 – Indian Health Service/ Tribal Hospital Inpatient Social Admits

240.2 – Indian Health Service/Tribal Hospital Inpatient Social Admits

(Rev. 596 , Issued: , Effective: 04-01-05, Implementation: 04-04-05)

There may be situations when an American Indian/Alaskan Native (AI/AN) beneficiary is admitted to an IHS/Tribal facility for social reasons. These social admissions are for patient and family convenience and are not billable to Medicare. There are also occasions where IHS/Tribal hospitals elect to admit patients prior to a scheduled day of surgery, or place a patient in a room after an inpatient discharge. These services are also considered to be social admissions as well.

For patients in a social admission status requiring outpatient services at another facility, Medicare has decided to disallow payment for inpatient Part B ancillary services, Type of Bill (TOB) 12X during a social admission stay when there is another bill from a different facility for an outpatient service, TOB 13X.